

Superseded for Form PTO-975. Effective December 6, 2004.

Application of Docket Number

10/758468

## APPLICATION AS FILED - PART I

(Column 1)

(Column 2)

OR

OTHER THAN  
SMALL ENTITY

FOR	NUMBER FILED	NUMBER EXTRA
BASIC FEE (37 CFR 1.16(h)(1)(ii) or (iii))	N/A	N/A
SEARCH FEE (37 CFR 1.16(h), 1.17(i)(1))	N/A	N/A
EXAMINATION FEE (37 CFR 1.16(g), 1.17, or 1.18)	N/A	N/A
TOTAL CLAIMS (37 CFR 1.16(i))	minus 20	
INDEPENDENT CLAIMS (37 CFR 1.16(i))	minus 3	
APPLICATION SIZE FEE (37 CFR 1.16(j))	If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(b)(1)(G) and 37 CFR 1.16(s).	
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))		

SMALL ENTITY	OTHER THAN SMALL ENTITY
RATE (1)	RATE (1)
N/A	\$150.00
N/A	\$250
N/A	\$100
X\$ 25	
X100	
+180=	
TOTAL	

OTHER THAN SMALL ENTITY
RATE (1)
N/A
\$300
\$600
\$200
X\$50
X200
+360=
TOTAL

\* If the difference in column 1 is less than zero, enter "0" in column 2.

## APPLICATION AS AMENDED - PART II

(Column 1)

(Column 2)

(Column 3)

SMALL ENTITY

OR

OTHER THAN  
SMALL ENTITY

AMENDMENT	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRES- ENT EXTRA
3/10	14 Minus	20	
Total Claims	14	20	
Independent Claims	2 Minus	3	
Application Size Fee (37 CFR 1.16(s))			
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))			

SMALL ENTITY	OTHER THAN SMALL ENTITY
RATE (1)	RATE (1)
X\$ 25	
X100	
+180=	
TOTAL ADDL FEE	

OTHER THAN SMALL ENTITY
RATE (1)
X\$50
X200
+360=
TOTAL ADDL FEE

AMENDMENT	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRES- ENT EXTRA
8/10	14 Minus	20	
Total Claims	14	20	
Independent Claims	1 Minus	3	
Application Size Fee (37 CFR 1.16(s))			
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))			

SMALL ENTITY	OTHER THAN SMALL ENTITY
RATE (1)	RATE (1)
X\$ 25	
X100	
+180=	
TOTAL ADDL FEE	

OTHER THAN SMALL ENTITY
RATE (1)
X\$50
X200
+360=
TOTAL ADDL FEE

\* If the entry in column 1 is less than the entry in column 2, enter "0" in column 3.

\*\* If the Highest Number Previously Paid For in THIS SPACE is less than 20, enter "20".

\*\*\* If the Highest Number Previously Paid For in THIS SPACE is less than 3, enter "3".

The Highest Number Previously Paid For (Total or Independent) is the highest number found in the appropriate box in column 1.

A collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the PTO to process) an application. Confidentiality is afforded by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete. The amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.